only 90,056 members of the American Medical Association, and that 40,000 of them are indifferent about organization and progress is all worth knowing, and the reason for such statistics is most important to us.

At our 1925 state meeting at Elko, we will have a paper about "The Workings of the American Medical Association." This should create interest where now there

is indifference.

Read on and see what Dr. Harris said about Direct vs. Indirect Medical Service and Dr. Haggard's message on Periodic Health Examinations. You may obtain articles on and examination blanks for physical examination of apparently healthly persons, from the American Medical Association.

The graduate extension work being carried on by several universities and proposed to be done by the American Medical Association will save us time and money by bringing the teachers to us.

More clinics and case reports are advocated for our

county and state programs.

Remember that the American Medical Association is not only a group of officers; it is you and I. What would American medicine be without this organization? Belong and boost. Read the Journal and Bulletin. Subscribe for Hygeia for your clientele, your city library, your politi-

What subjects do you want presented and discussed at Elko next fall? What subject will you present or discuss? After the program is arranged it is too late to say "Why was I not listed for discussion or a paper?"

California Northern District Medical Society (reported by Charles J. Durand, secretary) — The thirty-seventh semi-annual meeting of the California Northern District Medical Society was held in Sacramento on November 25, 1924, C. E. Schoff, Sacramento, president, and C. J. Durand, Colfax, secretary.

The morning session was devoted to clinics of the Sacramento Hospital:

Surgical, by J. B. Harris, M. D.; A. K. Dunlap, M. D. Medical, by F. F. Gundrum, M. D.; F. N. Scatena, M. D.

Urological, by N. G. Hale, M. D.

At the afternoon session, Dehydration in Infancy and Childhood was discussed by Edward S. Babcock, M. D., Sacramento; The Kidneys in Pregnancy, by Alice F. Maxwell, M. D., San Francisco; Practical Points in the Diagnosis of Gastro-intestinal Disease, by Walter C. Alvarez, M. D., San Francisco; Practical Considerations of Sinus Diseases, by Joseph O. Chiapella, M. D., Chico; and Pyelography in Its Relation to Urology, by Nathan G. Hale, M. D., Sacramento.

At the closing business session, the following officers were elected: President, Charles J. Durand, Colfax; first vice-president, J. R. Snyder, Sacramento; second vicepresident, Oscar Johnson, Sacramento; third vice-president, Dewey Powell, Stockton; secretary, J. O. Chiapella, Chico; treasurer, O. Stansbury, Chico; board of censors, James H. Parkinson, Sacramento; J. D. Dameron, Stockton; D. H. Moulton, Chico; Charles E. Schoff, Sacramento; George J. Hall, Sacramento.

California Association of Medical Social Workers (reported by C. Ruth Hersey, secretary pro tem.)—At an executive meeting held November 21 at the Children's Hospital, the following new members were elected: Miss Alice M. Keene, Director Health Center, St. Luke's Hos-Alice M. Keene, Director Health Center, St. Luke's Hospital; Miss M. Meininger, clerical assistant, Mount Zion dispensary; Miss Margaret M. Lindsay, Stanford Women's Clinic; Erla I. Ninnis, Skin Clinic, Stanford Hospital; C. Ruth Hersey, head worker, Medical Clinic, Stanford Hospital; Abbie Carleton Doak, Children's Clinic, Stanford; Ida Schoenitzer, district nurse, San Bruno clinic. Ruth Cooper, County Charities, Los Angeles. The president reported seven favorable answers to fourteen letters sent to possible candidates to membership.

fourteen letters sent to possible candidates to membership in Southern California.

The Army Wants Doctors-On January 12, 1925, an examination will be held for the selection of medical officers of the United States Army. Those interested may secure additional information from any military organi-

Medicine Before the Bench

FINDINGS AND COMMENTS OF THE COURTS ON ACTS AND OMISSIONS OF DOCTORS

[Editor's Note-The law reports contain many interesting decisions, involving the reputations and fortunes of doctors. In this column in each issue a brief summary of one or more decisions and comments of the several courts of last resort upon the cases will appear. The matter will be selected by our general counsel, Hartley F. Peart, who, with Mr. Hubert T. Morrow, attorney for Southern California, will contribute from time to time.]

In a case cited with great frequency before the courts, it appeared that the defendants were licensed physicians and surgeons practicing as partners. One of them, Dr. S., amputated the right leg of the plaintiff, the patient dying a short time thereafter. The representatives of his estate secured a verdict before a jury, from which verdict an appeal was taken. It appears that the body of the deceased plaintiff was exhumed at the instance of the deceased's administrator to determine just what the condition of the bones were, and a portion of the bones of the plaintiff were produced in court. The Supreme Court of the state in which the action was tried, in passing upon the case, wrote an opinion which has become a classic. We quote from a portion of it, as follows:

"A final and practical reason for the exception to the ordinary rule in negligence cases is the inherent and inevitable uncertainty of available testimony. The basis of the proof of negligence and of the hypothetical questions to plaintiff's experts is, naturally, the narrative of the family or friends of the patient. Their testimony must ordinarily be unsatisfactory, because of the presence of natural bias, the absence of technical knowledge essential to proper observation, and often the want of opportunity for actual perception, as will presently appear in this case. 'The physician,' said Judge Upton, 'is liable to have his acts misjudged, his motives suspected, and the truth colored or distorted, even where there are no dishonest intentions on the part of his accusers. And from the very nature of his duty he is constantly liable to be called upon to perform the most critical operations in the presence of persons united in interest and sympathy by the ties of family, where he may be the only witness in his own behalf.' This is not necessarily, however, the greatest of the surgeon's tribulations. He is confronted by other uncertainties in testimony greater than those of the human constitution, however fearfully and wonderfully we may be made or act, and greater than those of physical science, however elusive it may be. He is faced by the eccentricities of medical experts. We have no inclination to share in the prevalent and intemperate denunciation to their unreliability and venialty. But if every verdict mulcting a reputable physician in damages must be sustained, if any of his professional brethren can be induced to swear that, assuming the testimony of the family and friends of the patient to be true, the physician had made a mistake of judgment or had been guilty of unscientific practice, then the profession would be one which 'unmerciful disaster follows fast and follows faster.'"

Whose Doctor Are You?—"Nearly every industrial concern employs some doctor," notes Samuel E. Earp (Journal Indiana Medical Association). "Every department store, hotel, fraternal and civic organization also has its own doctor. Most of these physicians receive a nominal fee. A general practitioner is called to see none of these sick persons, and hence he does less practice than in former days, and the newer generation feels the effect more than do those who have been established for a number of years and do work as consultants.'